

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE



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NAME OF FILER (LAST) (FIRST) (MIDDLE)
FOSTER ROBERT G

1. Office, Agency, or Court

Agency Name

CITY OF LONG BEACH

Division, Board, Department, District, if applicable

LEGISLATIVE DEPARTMENT

Your Position

CITY MAYOR

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☒ City of LONG BEACH

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2012.

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 6

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☒ Schedule B - Real Property - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge

I certify under penalty of perjury under the laws of the State of California

Date Signed 2/28/13
(month, day, year)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

ROBERT G. FOSTER

NAME OF BUSINESS ENTITY
Various Diversified Mutual Funds

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Registered with the SEC

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☒ Over \$1,000,000

NATURE OF INVESTMENT **Mutual Funds**
☐ Stock ☒ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **12** _____ / _____ / **12**
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Various Governmental Bonds, including

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Municipal Bonds

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☒ Over \$1,000,000

NATURE OF INVESTMENT **Bonds**
☐ Stock ☒ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **12** _____ / _____ / **12**
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
CA Municipal Money Market

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Municipal Bonds

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT **Money Market Funds**
☐ Stock ☒ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **12** _____ / _____ / **12**
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Ice Energy, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Appliance Energy Technology

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT **Options**
☐ Stock ☒ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **12** _____ / _____ / **12**
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **12** _____ / _____ / **12**
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **12** _____ / _____ / **12**
 ACQUIRED DISPOSED

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name ROBERT G. FOSTER

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
55306 Firestone

CITY
La Quinta, California

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000 _____/_____/_____
☐ \$10,001 - \$100,000 _____/_____/_____
☒ \$100,001 - \$1,000,000 ACQUIRED DISPOSED
☐ Over \$1,000,000

NATURE OF INTEREST
☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ Other _____

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
☐ None
Tenant - David Podesta

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000 _____/_____/_____
☐ \$10,001 - \$100,000 _____/_____/_____
☐ \$100,001 - \$1,000,000 ACQUIRED DISPOSED
☐ Over \$1,000,000

NATURE OF INTEREST
☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ Other _____

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
☐ None

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments:

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name ROBERT G. FOSTER

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
California ISO

ADDRESS (Business Address Acceptable)
P.O. Box 639014

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION
Board Governor

GROSS INCOME RECEIVED

<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input checked="" type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

<input type="checkbox"/> \$500 - \$1,000
<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> OVER \$100,000

INTEREST RATE TERM (Months/Years)

_____ % ☐ None

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

_____ City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name ROBERT G. FOSTER

► NAME OF SOURCE (Not an Acronym)
BP America, Inc.

ADDRESS (Business Address Acceptable)
4 Centerpointe Dr. #479 La Palma, CA 90623

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Energy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 14 / 12	\$ 250	2 tickets to Grand Prix
___ / ___ / ___	\$	Dinner
___ / ___ / ___	\$	(\$125 each ticket)

► NAME OF SOURCE (Not an Acronym)
City of San Francisco

ADDRESS (Business Address Acceptable)
1 Dr. Carlton B Goodlett Pl. San Francisco, CA 94102

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Presented Key to City with San Francisco Mayor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 26 / 12	\$ 56	2 tickets to Giants vs.
___ / ___ / ___	\$	Dodgers Game
___ / ___ / ___	\$	\$28 each ticket)

► NAME OF SOURCE (Not an Acronym)
CSULB Student Union

ADDRESS (Business Address Acceptable)
1250 Bellflower Blvd. Long Beach, CA 90840

BUSINESS ACTIVITY, IF ANY, OF SOURCE
N/A

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 17 / 12	\$ 65	Black & Gold 49er
___ / ___ / ___	\$	Long Sleeved Track
___ / ___ / ___	\$	Jacket

► NAME OF SOURCE (Not an Acronym)
SA Recycling

ADDRESS (Business Address Acceptable)
482 Pier T Ave. Berth 118 Long Beach, CA 90802

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Recycling

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 29 / 12	\$ 400	2 tickets to Angels vs.
___ / ___ / ___	\$	Yankees Game
___ / ___ / ___	\$	(\$200 each ticket)

► NAME OF SOURCE (Not an Acronym)
Long Beach City College

ADDRESS (Business Address Acceptable)
4901 E. Carson Street Long Beach, CA 90808

BUSINESS ACTIVITY, IF ANY, OF SOURCE
N/A

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 19 / 12	\$ 60	All-Access Parking
___ / ___ / ___	\$	Pass 2012-2013 for
___ / ___ / ___	\$	LBCC Campus

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$	
___ / ___ / ___	\$	
___ / ___ / ___	\$	

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name ROBERT G. FOSTER

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym) Rockefeller Philanthropy Advisors	
ADDRESS (Business Address Acceptable) 6 West 48th Street, 10th Floor	
CITY AND STATE New York, NY 10036	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
N/A	
DATE(S): <u>04 / 23 / 12</u> - <u>04 / 23 / 12</u> AMT: \$ <u>445.60</u> (If gift)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
<input checked="" type="checkbox"/> Made a Speech/Participated in a Panel	
<input checked="" type="checkbox"/> Other - Provide Description	
<u>Travel reimbursement for Air & Ground transportation</u> <u>for meeting attended for CA Competes strategy panel</u>	

▶ NAME OF SOURCE (Not an Acronym) California ISO	
ADDRESS (Business Address Acceptable) P.O. Box 639014	
CITY AND STATE Folsom, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
Energy	
DATE(S): <u>01 / 01 / 12</u> - <u>12 / 31 / 12</u> AMT: \$ <u>8,139.87</u> (If gift)	
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input checked="" type="checkbox"/> Income	
<input type="checkbox"/> Made a Speech/Participated in a Panel	
<input checked="" type="checkbox"/> Other - Provide Description	
<u>Travel Reimbursements for various meetings attended</u> <u>as a Governor on the ISO Board.</u>	

▶ NAME OF SOURCE (Not an Acronym) Calif. Foundation on Environment & Economy (CFEE)	
ADDRESS (Business Address Acceptable) Pier 35, Suite 202	
CITY AND STATE San Francisco, CA 94133	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
N/A	
DATE(S): <u>09 / 27 / 12</u> - <u>09 / 28 / 12</u> AMT: \$ <u>493.69</u> (If gift)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
<input checked="" type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	
<u>Travel reimbursement expenses for Information &</u> <u>Communication Technologies Workshop (On Panel)</u>	

▶ NAME OF SOURCE (Not an Acronym) Calif. Foundation on Environment & Economy (CFEE)	
ADDRESS (Business Address Acceptable) Pier 35, Suite 202	
CITY AND STATE San Francisco, CA 94133	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
Chairman - Study Travel Project to Brazil	
DATE(S): <u>11 / 14 / 12</u> - <u>11 / 21 / 12</u> AMT: \$ <u>8,313.64</u> (If gift)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
<input type="checkbox"/> Made a Speech/Participated in a Panel	
<input checked="" type="checkbox"/> Other - Provide Description	
<u>Travel reimbursement expenses for T1201 Study</u> <u>Travel Program to Brazil.</u>	

Comments: _____